

**Annual Report Form for the State of Washington
For Calendar Year 20__
Hazardous Liquid Pipelines**

Part A. Operator Information
<div style="margin-bottom: 20px;">1. Name of Pipeline Company _____</div> <div style="margin-bottom: 20px;">2. Company Headquarters Address and Telephone Number (Include Area Code) _____ _____ _____ _____</div> <div>3. Pipeline Facility Address & Telephone Number (If Different from Headquarters Address) _____ _____ _____ _____</div>

As required by WAC 480-75-650, hazardous liquid pipeline companies must file an annual report as prescribed by the Washington Utilities and Transportation Commission on or before April 1st of each year.

Part B. Pipeline Mileage Information
<p>*NOTE: This form is for reporting pipeline information within the State of Washington only. Do not include pipeline mileage from other states.</p> <div style="margin-top: 20px;">1. Type of Pipeline and miles for each type</div> <div style="margin-top: 10px;"><div style="display: inline-block; width: 400px;"></div><div style="display: inline-block; vertical-align: middle;"><input type="checkbox"/> Intrastate _____ miles</div></div> <div style="margin-top: 10px;"><div style="display: inline-block; width: 400px;"></div><div style="display: inline-block; vertical-align: middle;"><input type="checkbox"/> Interstate _____ miles</div></div>

Part C. Safety Related Conditions (Intrastate companies only)

***NOTE: Interstate companies need not report information for this question, skip Part C and go to Part D.**

- 1. List any safety related conditions as defined in Title 49 CFR 195.55. Use additional sheets if needed.**

Part D. Preparer Information & Signature

- 1. Preparer's Name & Title**

- 2. Telephone Number (Include Area Code)**

- 3. E-mail Address**

- 4. Signature**

Date

Please submit this annual report by **April 1** to the following address:

WUTC – Pipeline Safety Section
PO Box 47250
Olympia, WA 98504-7250

Please contact Sondra Walsh at (360) 664-1286 if you have any questions. Thank you.